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Bib Data Sheet

CONFIRMATION NO. 3383

<b>SERIAL NUMBER</b> 09/534,453	<b>FILING DATE</b> 03/24/2000 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3627	<b>ATTORNEY DOCKET NO.</b> AGOR-0001	
<b>APPLICANTS</b> Roger Cowles, Philadelphia, PA; <b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/126,364 03/26/1999 <i>yes</i> <b>** FOREIGN APPLICATIONS *****</b> <i>None</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 05/10/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 33	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 00881					
<b>TITLE</b> Architecture designed specifically for E-commerce between nations					
<b>FILING FEE RECEIVED</b> 764	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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<b>SERIAL NUMBER</b> 09/534,453	<b>FILING DATE</b> 03/24/2000 <b>RULE</b> -	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 2768	<b>ATTORNEY DOCKET NO.</b> AGOR-0001
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**APPLICANTS**  
Roger Cowles, Philadelphia, PA ;

**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLN CLAIMS BENEFIT OF 60/126,364 03/26/1999 *yes*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *None*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED** **\*\* SMALL ENTITY \*\***  
\*\* 05/10/2000

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 33	<b>INDEPENDENT CLAIMS</b> 3
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Verified and Acknowledged *[Signature]* *[Initials]*

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*Philadelphia, PA 19103*

**TITLE**  
Architecture designed specifically for E-commerce between nations

<b>FILING FEE RECEIVED</b> 527	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit